

PART B - FEE(S) TRANSMITTAL

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7590

02/27/2006

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05/12/2006 CCHAU2 00000037 10071435

01 FC:2501 700.00 OP
02 FC:8001 24.00 OP
03 FC:1504 300.00 OP

Marie E. Salvato	(Depositor's name)
<i>Marie E. Salvato</i>	(Signature)
5/18/06	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/071,435	02/08/2002	James Baumgardner	22253-71212 (N2376US)	2825

TITLE OF INVENTION: EQUILIBRATION METHOD FOR HIGH RESOLUTION IMAGING OF LUNG COMPLIANCE AND DISTRIBUTION OF FUNCTIONAL RESIDUAL CAPACITY

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	05/30/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
SMITH, RUTH S	3737	600-420000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Evelyn H. McConathy
Drinker Biddle & Reath...
2 _____ LLP
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

The Trustees of the University of Pennsylvania

Philadelphia, Pennsylvania

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed;

☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
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☒ A check in the amount of the fee(s) is enclosed.
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☒ The Director is hereby authorized by charge to deposit fee(s), or credit any overpayment, to Deposit Account Number 50-0573 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Evelyn H. McConathy
Evelyn H. McConathy

Date

5/18/06

Typed or printed name

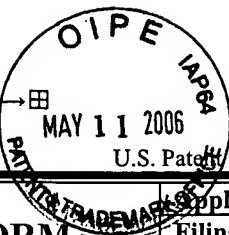
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35, 279

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number		10/071,435
Filing Date		02/08/2002
First Named Inventor		BAUMGARDNER, et al
Group Art Unit		3737
Examiner Name		SMITH, Ruth S.
Total Number of Pages in This Submission	7	Attorney Docket Number
		22253-71212 [204650] (N-2376)

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply/ <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) – Figs. <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> Issue Fee Transmittal; Check in the amount of \$1,024.00; and Return Postcard.
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Drinker Biddle & Reath LLP
Signature	<i>Evelyn H. McConathy</i>
Printed Name	Evelyn H. McConathy, Reg. No. 35,279
Date	5/8/06

CERTIFICATE OF FIRST CLASS MAIL

I hereby certify that this paper, along with any documents referred to as being enclosed therewith, is being deposited with the United States Postal Service via first class mail addressed to Mail Stop Issue Fee; Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: 5/8/06		
Typed or printed name	Marie E. Salvato	
Signature	<i>Marie E. Salvato</i>	Date: 5/8/06